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TO: Commissioner for Patents
Attn: Examiner Henry W. Orr
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Facsimile Center
Alexandria, VA 22313-1450

FROM: George H. Gates
OUR REF.: G&C 30566.318-US-01
TELEPHONE: (310) 642-4146

Total pages, including cover letter: 18

PTO FAX NUMBER: 571-273-8300

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Title of Document Transmitted:	TRANSMITTAL DOCUMENTS (2), AMENDMENT UNDER 37 C.F.R. §1.111, PETITION FOR EXTENSION OF TIME, STATEMENT OF COMMON OWNERSHIP, CERTIFICATE UNDER 37 C.F.R. §3.73(b) AND TERMINAL DISCLAIMER
Applicant:	Jose M. de Freitas Garcia et al.
Serial No.:	10/800,877
Filed:	March 15, 2004
Group Art Unit:	2176
Title:	USER INTERFACE ELEMENTS OF A SHEET SET MANAGER FOR A GRAPHICS PROGRAM
Our Ref. No.:	G&C 30566.318-US-01

Please charge all fees to Deposit Account No. 50-0494 of Gates & Cooper LLP.

By: 

Name: George H. Gates
Reg. No.: 33,500

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Signature

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G&C 30566.318-US-01

APR 26 2007

Due Date: May 9, 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jose M. de Freitas Garcia et al. Examiner: Henry W. Orr
 Serial No.: 10/800,877 Group Art Unit: 2176
 Filed: March 15, 2004 Docket: G&C 30566.318-US-01
 Title: USER INTERFACE ELEMENTS OF A SHEET SET MANAGER FOR A GRAPHICS PROGRAM

CERTIFICATE OF MAILING OR TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being filed via facsimile transmission to the U.S. Patent and Trademark Office on April 26, 2007.

By: 
 Name: George H. Gates

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

We are transmitting herewith the attached:

- ☒ Transmittal sheet, in duplicate, containing a Certificate of Mailing or Transmission under 37 CFR 1.8.
- ☒ Amendment Under 37 C.F.R. §1.111.
- ☒ Petition for Extension of Time for one (1) month.
- ☒ Charge Extension of Time fee in the amount of \$120.00 to the Deposit Account.
- ☒ Statement of Common Ownership.
- ☒ Certificate Under 37 C.F.R. §3.73(b).
- ☒ Terminal Disclaimer to Obviate a Double Patenting Rejection.
- ☒ Charge Terminal Disclaimer fee in the amount of \$130.00 to the Deposit Account.
- ☒ Charge the additional fees in the amount of \$1,000.00 to the Deposit Account.

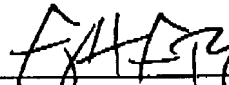
CLAIMS PRESENT

Claims Remaining:	Highest Number Previously Paid For:	Number Extra	Rate	Fee
Total Claims				
10	21	0	x \$50.00	= \$0.00
Independent Claims				
8	3	5	x \$200.00	= \$1,000.00
MULTIPLE DEPENDENT CLAIM FEE				\$0.00
TOTAL FILING FEE				\$1,000.00

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

Please charge all fees to Deposit Account No. 50-0494 of Gates & Cooper LLP. A duplicate of this paper is enclosed.

Customer Number 55895
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